

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10617366

FILING DATE

7/11/03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3	1					
4	1					
5		1				
6		2				
7		(1)				
8		(1)				
9		3				
10		3				
11		(1)				
12		(1)				
13	1					
14		1				
15	1					
16		1				
17		1				
18		2				
19		(1)				
20		(1)				
21		(1)				
22		(1)				
23		(1)				
24		(1)				
25		(1)				
26		(1)				
27		(1)				
28	1					
29		1				
30						
31		(1)				
32	1					
33	1					
34	1					
35		1				
36		1				
37		1				
38		(1)				
39		(1)				
40	1					
41		1				
42		1				
43	1					
44	1					
45	1					
46		(1)				
47		(1)				
48		(1)				
49		(1)				
50		(1)				
TOTAL IND.	1					
TOTAL DEP.		1				
TOTAL CLAIMS	1	1				

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51		(1)				
52	1					
53						
54		1				
55		1				
56		1				
57		1				
58		1				
59	1					
60		1				
61		1				
62		1				
63	1					
64	1					
65		1				
66		1				
67		1				
68		1				
69		(1)				
70		(1)				
71		(1)				
72		(1)				
73		(1)				
74						
75						
76						
77						
78						
79						
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87						
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92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.		1				
TOTAL CLAIMS		1				